

Utah Department of Environmental Quality

Division of Drinking Water

Public Water System Inventory Report

Run Date:
08/04/2011 12:44 pm

PWS ID: UTAH23022 **Name:** TOOEE ARMY DEPOT
Legal Contact: TOOEE ARMY DEPOT **Rating:** Approved
RUSS SMALLING **Rating Date:** 12/17/1984
Address: SJMTE-CS-EO BLDG 8 **Activity Status:** Active
TOOELE, UT 84074
Phone Number: 435-833-3717
City Served (Area):
County: TOOEE COUNTY

System Type: Non Transient **Last Inv Update:** 07/28/2010 **Avg Daily Prod:**
Activity Status Cd: Active **Last Snty Srv Dt:** 10/14/2009 **Total Dsgn Cap:**
Population: 480 **Surveyor:** VICKIE ROLFE **Total Emerg Cap:**
Oper Period: 1/1 to 12/31

Gal/Day Gal/Min

Contacts

Contact Type	Name	Title	Phone Numbers		Email Address
			Office	Emergency	
AC	SMALLING, RUSS		435-833-3717		russ.smalling@us.army.mil

Service Connections

Connection Type	Meter Type Code	Meter Size	Number Connections
Residential	Unknown	0	5
Combined	Unknown	0	96
Agricultural	Unknown	0	12
			113 Total Svc Connections

Storage

Total Storage: 1,875,000 GAL **Number of Units:** 5 **Adequate Capacity:** NO

No.	Name	Type	Effective Volume	Constr Matl	Overflow Elev	Activity Status	Press'd
ST001	TANK# 1 TRAVEL CAMP # 1007	Ground	150,000 GAL	Concrete		A	NO
ST002	TANK #2 - MAIN RESERVOIR # 250	Ground	1,000,000 GAL	Steel		A	NO
ST003	TANK #3 - MAIN RESEVOIR # 251	Ground	400,000 GAL	Concrete		A	NO
ST004	TANK # 4 AMMO RESERVOIR # 1262	Ground	250,000 GAL	Steel		A	NO
ST005	TANK # 5 DEMO RESERVOIR # 1342	Ground	75,000 GAL	Steel		A	NO

Treatment Plants

No.	Plant Name	Approved Design Capacity (gal/day)	Activity Status	Treatment Process
TP001	NO 1 WELL NORTH CHLORINATOR		A	
TP003	NO 3 WELL NORTH CHLORINATOR		A	
TP004	NO 4 WELL NORTH CHLORINATOR		A	

Pumping Stations

Facility No	Facility Name	Activity Status	Capacity	Avail	Emerg Power	Operating Category	Total Dynamic Head
PF001	TURBINE HIGH THRUST #1 BLDG	A		P			
PF002	TRAVEL CAMP BOOSTER	A		P			
PF003	#4 WELL BOOSTER PUMP	I		P			

Distribution System

Pump Type	Total Dyn Head ft H2O	P.S.I.	Pressure Adequate	Cross Connection	Auhority Statement
No					

Sources

No.	Source Name	Activity Status	Source Type	Well Dia.	Safe Yield *	Pump Capacity	Location Data On File	Water Type	Availability	Period of Operation	Grnd Wtr Indicator
WS001	NO 1 WELL NORTH BUILDIN	Active	WL	20	400 GPM	400 GPM	Yes	GW	Permanent	1/1 to 12/31	
WS002	NO 2 WELL NORTH(BELON	Inactive	WL	16	569 GPM		Yes	GW	Permanent		
WS003	NO 3 WELL NORTH UDI BUII	Active	WL	16	575 GPM	570 GPM	Yes	GW	Permanent	1/1 to 12/31	
WS004	NO 4 WELL NORTH BUILDIN	Active	WL	12	150 GPM	150 GPM	Yes	GW	Permanent	1/1 to 12/31	
WS005	NO 5 WELL NORTH	Inactive	WL	6	25 GPM		Yes	GW	Other		

**Reports measured flow for wells, approved design capacity for all other sources.*